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APR 1 3 2005

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Robert C. Dorr
DORR CARSON SLOAN & BIRNEY, PC
3010 EAST 6TH AVENUE

DENVER, CO 80206

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Robert C. Dorr (Depositor's name)

April 13, 2005 (Date)

APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY	DOCKET NO.	CONFIRMATION NO.	
09/287,556	04/06/1999		OLAF VANCURA		1999/2		6442	
TITLE OF INVENTION:	METHOD FOR WAGERING	ON BACCARAT	TIE					
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PUBLICATION FEE	TOTAL F	EE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400)	\$0	\$1	400	06/10/2005	
EXA	MINER	ART UN	IT	CLASS-SUBCLASS]			
RIMELL,	SAMUEL G	2165		707-001000	•			
1. Change of correspondence	ce address or indication of "F	ee Address" (37	2. For prin	ting on the patent front page, li	ist	Dorr, Ca	rson, Sloan,	
CFR 1.363).		***	(1) the na	mes of up to 3 registered pater OR, alternatively,	nt attorneys	Birney	& Kramer, P.C.	
Address form PTO/SB/1	dence address (or Change of 22) attached.	Correspondence	, ,	ne of a single firm (having as	a member a	2		
"Fee Address" indica	ation (or "Fee Address" Indica	ation form	registered	attorney or agent) and the nan d patent attorneys or agents. If	nes of up to	•		
PTO/SB/47; Rev 03-02 Number is required.	or more recent) attached. Us	e of a Customer	listed, no	name will be printed.	no name is	3		
3. ASSIGNEE NAME ANI	D RESIDENCE DATA TO B	E PRINTED ON T	THE PATENT	(print or type)				
PLEASE NOTE: Unless recordation as set forth i	s an assignee is identified be n 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will app	ear on the patent. If an assign for filing an assignment.	nee is identifie		cument has been filed for	
(A) NAME OF ASSIGN	IEE	(B) RESIDENC	E: (CITY and STATE OR CO	UNTRY)	۲,		
Mikohn Ga	ming Corporatio	n	Las	Vegas, Nevada	89193			
Please check the appropriate	e assignee category or catego	ries (will not be pr	inted on the p	atent): 🗖 Individual 🛂 C	orporation or o	other private gro	up entity Government	
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Issue Fee	C		🖺 A check	in the amount of the fee(s) is er	nclosed.			
Publication Fee (No:	small entity discount permitte	ed)	☐ Payment	by credit card. Form PTO-2038	8 is attached.			
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	MALL ENTITY status. See			ant is no longer claiming SMA				
The Director of the USPTO NOTE: The Issue Fee and F interest as shown by the rec	is requested to apply the Issu Publication Fee (if required) v ords of the United States Pate	ue Fee and Publicate will not be accepted and Trademark	tion Fee (if and i from anyone Office.	y) or to re-apply any previousle other than the applicant; a reg	ly paid issue fe istered attorne	e to the applicat y or agent; or the	ion identified above. e assignee or other party in	

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27,782

Date

Registration No.

Robert C. Dorr

Authorized Signature

Typed or printed name _

PTO/SB/21 (09-04)

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Application Number

سسم				09/287,556	i			
	TRANSMITTAL		Filing Date	April 6, 199	9			
	FORM		First Named Inventor	Olaf Vancu	ra			
			Art Unit	2165				
(to	be used for all correspondence after initial	filing)	Examiner Name	Rimmell, S	amuel G			
Tot	al Number of Pages in This Submission	5	Attorney Docket Number	1482/335(a)				
		ENC	LOSURES (Check all	that apply)			
V	Fee Transmittal Form		Drawing(s)			After Allowance Communication to TC		
	Fee Attached		Licensing-related Papers			Appeal Communication to Board of Appeals and Interferences		
	Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement		Petition Petition to Convert to a Provisional Application Prower of Attorney, Revocatio Change of Correspondence A Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CE	Address		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): Part B - Fee(s) Transmittal		
	Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53	Remai	rks					

Date	April 13, 2005	Reg. No.	27,782		
	CERTIFICATE (OF TRANSMISSION/MA	ILING		
sufficient po	ertify that this correspondence is being facsimile transcribed as express mail in an envelope addressed to be solved as expressed as ex	o: Commissioner for Patents, P.	.O. Box 1450, Al	ited States Postal Servexandria, VA 22313-14 744799795 US	rice with 150 on
Signature	Robert CD	~			
Typed or pr	rinted name Robert C. Dorr - 27,782		Date	April 13, 2005	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Dorr, Carson, Sloan, Birney & Kramer, P.C.

Robert C. Dorr

Firm Name

Signature

Printed name

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Foos pursuant	to the	Consolid	ated	Appr	opria	tion.	s Act	2005	(H.R.	4818)
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FEE TRANSMITTAL For FY 2005

Applicant claims small entity status.	See 37 CFR 1.27	,
		_

	Complete if Known	
Application Number	09/287,556	
Filing Date	April 13, 2005	
First Named Inventor	Olaf Vancura	
Examiner Name	Rimmell, Samuel G.	
Art Unit	2165	
Attorney Docket No.	1482/335(a)	

TOTAL AMOUNT OF PAY	MENI (\$)	1,430.00	,	Attorney Docke	t No.	1482/335(a))		
METHOD OF PAYMEN	T (check all	that apply)							
under 37 CFF under 37 CFF warning: Information on this information and authorization	Deposit Account ified deposit a indicated be additional fee(R 1.16 and 1.1 s form may be	t Number: 04-141 account, the Direct elow (s) or underpayme 17 acome public. Credi	4 tor is her	Charge(s) Credi	ccount Nam	e: Dorr, Carso Il that apply) dicated below payments	, except for	the filin	
FEE CALCULATION									
1. BASIC FILING, SEAF	FILING F	EES mall Entity	SEAR	CH FEES Small Entity	EXAMII	NATION FEI	٧	es Paid	(\$)
<u>Application Type</u> Utility	300	<u>Fee (\$)</u> 150	Fee (\$	1 Fee (\$) 250	200	100	1.00	33 T UIU	741
Design	200	100	100	50	130	65			
Plant	200						-		
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Reissue Provisional	300 200	150 100	500 0	250	600 0	300 0			_
2. EXCESS CLAIM FEE Fee Description Each claim over 20 or, for Each independent claim Multiple dependent claim	es or Reissues, over 3 or, fo	each claim over	r 20 and		he origina ore than i	al patent in the origina	oal patent 20		all Entity Fee (\$) 25 100 180
	Extra Claims		Fee	Paid (\$)		Dependent (
- 20 or HP = HP = highest number of total Indep. Claims - 3 or HP = HP = highest number of indep	Extra Claims	<u>Fee (\$)</u>		Paid (\$)	Fee (ee Paid (\$)		
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4. OTHER FEE(S) Non-English Specific	cation \$1	30 fee (no smal	l entity	discount)				Fees F	Paid (\$)
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SUBMITTED BY						
Signature	Rebent	CD	Registration No. (Attorney/Agent)	27,782	Telephone	303-333-3010
Name (Print/Type)		Robert C	C. Dorr		Date	April 13, 2005

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